DATENT APPLICATION FEE DETERMINATION RECORD

Application	or	Docket	Number
() '			

Effective October 1, 1997														
CLAIMS AS FILED - PART I (Column 1) (Column 2)					Ş	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY					
FOR			NUMBE			NUMBER (EXTRA	F	RATE	FEE	ſ	RATE	FEE	
BASIC	C FEE								7.4	395.00	OR		790.00	
TOTA	L CLAIMS	L CLAIMS minus 20 =			*		×	\$11=		OR	x\$22=	i _		
INDE	PENDENT CLA	IMS	Ž	minu	s 3 =	*		,	(41=		OR	x82=		
* If the difference in column 1 is less than zero, enter *0" in column 2						+	135=		OR	+270=				
* If the	e difference in co	lumn 1 is	iess than z	ero, enter 10" ir	colum	ES. A	· · · · · · · · · · · · · · · · · · ·		TOTAL		OR	TOTAL	Ÿ	
				MENDED					COPY			OTHER THAN		
			ımn 1)		<u>`</u>	Column 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
ENT A		REM. AF	AIMS AINING TER IDMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•/(4	Minus	**	20	=	×	\$11=		OR	x\$22=		
MEN	Independent	.3	/	Minus	***	<u> </u>	=	,	x41=		OR	x82=		
٧	FIRST PRES	SENTA	TION OF	MULTIPLE	DEPI	ENDENT CL	AIM	+	135=		OR	+270=		
(Column 1) (Column 2) (Column 3)						ADI	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE				
NT B		CL REM AF	AIMS AINING FTER NDMENT		H N PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DMENT	Total	*		Minus	**		=	,	x\$11=		OR	x\$22=		
AMEN	Independent	*		Minus	***		=		x41=		OR	x82=		
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIN] [-	+135=		OR	+270=			
(Column 1) (Column 2) (Column 3)						AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE				
ENTC		REM A	_AIMS IAINING FTER NDMENT		PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*		Minus	**		=		x\$11=		OR	x\$22=		
AMENDMENT	independen	t *		Minus	***		=]	x41=		OR	x82=		
4	FIRST PRE	SENT	ATION OF	- MULTIPLE	DEF	PENDENT C	LAIM] [+135=		OR	+270=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20." If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3." The Highest Number Previously Paid For Intelligence of Independent is the highest number found in the appropriate box in column 1.														



UNITED STATES DEPARTMENT, OF COMMERCE Patent and Trademark Office

ASSISTANT, SECRETARY OF COMMERCE AND COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

NOTICE OF FILING/CLAIM FEE(S) DUE. TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: 90300											
Total Fee Calculation											
	Fee Code	Total # Claims	Number Extra	x	Fee	Fee =	<u>Total</u>				
	Sm./Lg.				Sm. Entity	Lg. Entity					
Basic Filing Fee	201/101						790				
Total Claims >20	203/103	-20	=	x							
Independent Claims >3	202/102	3 :	=	x							
Mult. Dep Claim Present	204/104										
Surcharge	205/105						13C				
English Translation	139					5					
TOTAL FEE CALCUL.	ATION										
Fees due upon filing the application:											
Total Filing Fees Due = \$											
Less Filing Fees Submitted - \$											
BALANCE DUE	= \$	W. Sa									
Office of Initial Pater											

FORM OIPE-RAM-01 (Rev. 5/97)